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CONFIRMATION NO. 9954

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|---|---|-------------------------------|---|---|--------------------------------|
| SERIAL NUMBER 10/658,102 | FILING OR 371(c) DATE 09/09/2003 RULE | CLASS 514 | GROUP ART UNIT 1617 | ATTORNEY DOCKET NO. 05408/100L619-US1 | |
| APPLICANTS Kelly A. Dunn, High Bridge, NJ; Patrick J. Lutz, Nazareth, PA; <div style="float: right; text-align: right;"> <i>AMC 6/28/2007</i> <i>filed 09/09/2002 AMC 6/28/2007</i> </div> | | | | | |
| ** CONTINUING DATA ***** This appln claims benefit of 60/409,692 ABN | | | | | |
| ** FOREIGN APPLICATIONS ***** | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 12/01/2003 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allegre</i> <i>AMC</i> Examiner's Signature Initials | | STATE OR COUNTRY NJ | SHEETS DRAWING 0 | TOTAL CLAIMS 28 | INDEPENDENT CLAIMS 9 |
| ADDRESS 7278 | | | | | |
| TITLE Method of controlling allergens | | | | | |
| FILING FEE RECEIVED 1560 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |